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PTO/SB/05 (4/98)

Approved for use through 09/30/2000. OMB 0651-0032  
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))</small>		<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 50%;">Attorney Docket No.</td><td style="width: 50%;">11-196</td></tr><tr><td>First Inventor or Application Identifier</td><td>OHTAKA</td></tr><tr><td>Title</td><td>PASSENGER DETECTING APPARATUS FOR VEHICLE</td></tr><tr><td>Express Mail Label No.</td><td></td></tr></table>	Attorney Docket No.	11-196	First Inventor or Application Identifier	OHTAKA	Title	PASSENGER DETECTING APPARATUS FOR VEHICLE	Express Mail Label No.															
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<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents.</small>		<b>ADDRESS TO:</b> Commissioner for Patents Mail Stop Patent Application Alexandria, VA 22313-1450																						
<div style="display: flex; justify-content: space-between;"><div style="width: 48%;"><p>1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small></p><p>2. <input checked="" type="checkbox"/> Specification <span style="float: right;">[Total Pages <b>23</b>]</span></p><p style="margin-left: 20px;">-Descriptive title of the Invention</p><p style="margin-left: 20px;">-Cross Reference to Related Applications</p><p style="margin-left: 20px;">-Background of the Invention</p><p style="margin-left: 20px;">-Summary of the Invention</p><p style="margin-left: 20px;">-Brief Description of the Drawings</p><p style="margin-left: 20px;">-Detailed Description of the Preferred Embodiment</p><p style="margin-left: 20px;">-Claims</p><p style="margin-left: 20px;">-Abstract of the Disclosure</p></div><div style="width: 48%;"><p>5. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p><p>6. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small></p><p style="margin-left: 20px;">a. <input type="checkbox"/> Computer Readable Copy</p><p style="margin-left: 20px;">b. <input type="checkbox"/> Paper Copy (identical to computer copy)</p><p style="margin-left: 20px;">c. <input type="checkbox"/> Statement verifying identity of above copies</p></div></div> <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <span style="float: right;">[Total Sheets <b>6</b>]</span></p> <p>4. Oath or Declaration <span style="float: right;">[Total Sheets <b>3</b>]</span></p> <p style="margin-left: 20px;">a. <input checked="" type="checkbox"/> Newly executed (original or copy)</p> <p style="margin-left: 20px;">b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63 (d)) <small>(for continuation/divisional with Box 16 completed)</small></p> <p style="margin-left: 40px;">i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"><small>*NOTE FOR ITEMS 1 &amp; 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28)</small></div>		<b>ACCOMPANYING APPLICATION PARTS</b> <p>7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet &amp; document(s))</p> <p>8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <span style="margin-left: 20px;"><input type="checkbox"/> Power of Attorney</span> <small>(when there is an assignee)</small></p> <p>9. <input type="checkbox"/> English Translation Document <small>(if applicable)</small></p> <p>10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <span style="margin-left: 20px;"><input checked="" type="checkbox"/> Copies of IDS Citations</span></p> <p>11. <input type="checkbox"/> Preliminary Amendment</p> <p>12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(should be specifically itemized)</small></p> <p style="margin-left: 20px;">*Small Entity Statement(s) <span style="margin-left: 20px;"><input type="checkbox"/> Statement filed in prior application, Status still proper and desired</span> <small>(PTO/SB/09-12)</small></p> <p>13. <input type="checkbox"/> Statement filed in prior application, Status still proper and desired</p> <p>14. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small></p> <p>15. <input type="checkbox"/> Other: .....</p>																						
<p>16. <b>If a CONTINUING APPLICATION</b>, check appropriate box, and supply the requisite information below and in a preliminary amendment:</p> <p><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) <span style="float: right;">of prior application No: .....</span></p> <p>Prior application information: Examiner: ..... Group/Art Unit: .....</p> <p><b>For CONTINUATION or DIVISIONAL APPS only:</b> The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>																								
<p style="text-align: center;"><b>17. CORRESPONDENCE ADDRESS</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 40%;"><input checked="" type="checkbox"/> Customer Number or Bar Code Label</td><td style="width: 20%; text-align: center; font-size: 1.2em;"><b>23400</b></td><td style="width: 40%;">or <input type="checkbox"/> Correspondence address below</td></tr><tr><td colspan="3" style="text-align: center;"><small>(Insert Customer No. or Attach bar code label here)</small></td></tr></table> <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 20%;">Name</td><td colspan="3"></td></tr><tr><td>Address</td><td colspan="3"></td></tr><tr><td>City</td><td style="width: 20%;">State</td><td style="width: 20%;">Zip Code</td><td></td></tr><tr><td>Country</td><td>Telephone</td><td>Fax</td><td></td></tr></table>			<input checked="" type="checkbox"/> Customer Number or Bar Code Label	<b>23400</b>	or <input type="checkbox"/> Correspondence address below	<small>(Insert Customer No. or Attach bar code label here)</small>			Name				Address				City	State	Zip Code		Country	Telephone	Fax	
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Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Arlington, VA 22202. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Alexandria, VA 22313-1450.

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<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2003</h2> <p style="margin: 5px 0;">Patent fees are subject to annual revision.</p>		<b>Complete if Known</b>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	
		Filing Date <b>September 30, 2003</b>	
		First Named Inventor <b>OHTAKA</b>	
		Examiner Name	
		Group/Art Unit	
TOTAL AMOUNT OF PAYMENT (\$)		790	
		Attorney Docket No. <b>11-196</b>	

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)																																																																																																																																																																																								
<p>1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <p>Deposit Account Number <b>50-1147</b></p> <p>Deposit Account Name <b>POSZ &amp; BETHARDS, PLC</b></p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed:</p> <p><input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p>	<p><b>3. ADDITIONAL FEES</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>1252</td><td>410</td><td>2252</td><td>205</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>930</td><td>2253</td><td>460</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1450</td><td>2254</td><td>725</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>1970</td><td>2255</td><td>985</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>320</td><td>2401</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>320</td><td>2402</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>280</td><td>2403</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - 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1205	18	2205	9	**Reissue claims in excess of 20 and over original patent																																																																																																																																																																																					
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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type) <b>DAVID G. POSZ</b>	Registration No. (Attorney/Agent) <b>37,701</b>	Telephone <b>(703) 707-9110</b>	
Signature		Date <b>September 30, 2003</b>	

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